PTOISB06 (08-03)
Approved for use through 7/31/2008, OMB 0651-0032
adminst Office; U.S. DEPARTMENT OF COMMERCE

S	FEE
BASIC FEE (37 GFR 1.16(a))	
### SEC FEE (27 CPR 1.16(a))  TOTAL CLAIMS (37 CPR 1.16(a))  #### TOTAL CLAIMS (37 CPR 1.16(a))  ##################################	
TOTAL CLAMS	
HIDEPENDENT CLAIMS (37 OFR 1.16(0))  MILL TOPLE DEPENDENT CLAIM PRESENT (37 OFR 1.16(0))  "If the difference in column 1 is less than zero, enter "O" in column 2.  CLAIMS AS AMENDED — PART \$1	
MALTIPLE DEPENDENT CLAIM PRESENT (37 CPA 1.18(d))  +8 # OR +5 #  * If the difference in column 1 is less than zero, enter 'U' in column 2. TOTAL OR TOTAL  CLAIMS AS AMENDED - PART II	
" If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL OR TOTAL  CLAIMS AS AMENDED - PART II	
CLAIMS AS AMENDED - PART II	
2-3-7C	
(Common 1) (Common 2) (Common 3) SMALL ENTITY SMALL ENTITY	
REMAINING NUMBER PRESENT RATE ADDITIONAL FEE TIONAL FEE FEE	MAL
Total 13 Minus " // = x = 25 = OR x = 50.	
The Country of the co	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(4D) +1/BOs OR +1/34Os	
TOTAL TOTAL	
ADDL FEE OR ADDL FEE	
2 - 2 / Ch(Column 1) (Column 2) (Column 3)	
REMAINING NUMBER PRESENT RATE ADDI- TIONAL TIONAL THOMAL AMENDMENT PAUD FOR FEE	NAL
Total 3 Minus " 7 / "	
III Integeration 1/6 Minus III /O E X1/00= OR X1/200-	
FIRST PRESENTATION OF MATERIE DEPENDENT CLAIM (37 CFR 1.16(d)) + 1 HBD- OR + 34D-	
TOTAL TOTAL ADD'L FEE OR ADD'L FEE	
(Column 1) (Column 2) (Column 3)	
RATE ADDITIONAL FEE OR X S. S. OR X S. OR X S. S. OR X S. S. OR X S. S. OR X	WL
Total press seeps ' 7   " 7   " 25 - OR x 4 50 -	7
Withprendent corona . / / Millians / () " // x s/00. OR x s Z20.	7
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (37 OFR 1.1840) + 1/900 OR + 340	
TOTAL TOTAL	
* If the entry in column 1 is inset then the entry in column 2, write "O" in column 3.	$\dashv$
"If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 3, enter "2". The "Highest Number Previously Paid For" (IN THIS SPACE is tess than 3, enter "2".	

The Tiginest Number Previously Paid For (Total or Independent) is the highest number bound in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 15 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and estimating the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the entount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. OO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and scled option 2.